FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

1370245



FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	SEC USE	ONLY
Prefix		Serial
	1	1

	UNIFORM LIM	HTED OFFERIN	IG EXEMPTIO			
Name of Offering (check if the Private Placement of Limited Partnersh	is is an amendment and main interests of PETRUS	nne has changed, and FUND PLUS, L.P	ndicate change.)		EC N RE	CEIVI SCA
Filing Under (Check box(es) that apply] ULOE		,
Type of Filing: New Filing					SEP	1 4 2006 >
		A. BASIC IDENTIFI	CATION DATA		1867	
1. Enter the information requested about						105 /82/
Name of Issuer (check if the PETRUS FUND PLUS L.P.	is is an amendment and n		indicate change.)		1. 1	
Address of Executive Offices 2300 West Plano Parkway, Plan	(No. and Street, City	y, State, Zip Code)		Telephone N	lumber (Includin (972) 535-190	
Address of Principal Business Operation (if different from Executive Offices)	ons (No. and Street, Cit	y, State, Zip Code)	Telephone N	umber (Including A		
Brief Description of Business Investment Partnership						
Type of Business Organization			· · · · · · · · · · · · · · · · · · ·			
corporation	\boxtimes	limited partner	ship, already formed			other (please specify):
business trust		limited partner	ship, to be formed			
Actual or Estimated Date of Incorpor	ration or Organization:		Month 0 6	Year 0 6	⊠ Actual	☐ Estimated
Jurisdiction of Incorporation or Orga	nization: (Enter two-lette	U.S. Postal Service a	bbreviation for State:	DE		
	CN for Canad	la; FN for other foreign	n jurisdiction)			
GENERAL INSTRUCTIONS						
Federal: 11/10 Must File: All issuers making an offering of st	encities in religare on an executi	on under Resulation D or Sec	ion 4(6), 17 CFR 230,501 et	sen, or 15 U.S.C. 77d(6).		
When To File: A notice must be filed no later than received by the SEC at the address given below or,	15 door ofter the first sale of sec	utities in the offering. A not	ice is deemed filed with the l	U.S. Securities and Exclu	inge Commission (SE	C) on the earlier of the date it i
received by the SEC at the address given below or, Where To File: U.S. Securities and Exchange Com-			e date it was marked by Orine	a states reposition or con-	11140 131013 15 1744 1544	•
Copies Required: Five (5) copies of this notice musignatures.	st be filed with the SEC, one of w	hich must be manually signed	. Any copies not manually s	igned must be photocopie	s of the manually sign	ed copy or bear typed or printe
Information Required: A new filing must contain changes from the information previously supplied i	all information requested. Amen a Paris A and B. Part E and the A	dments need only report the opportance of the presential need not be filled with	name of the issuer and offeri the SEC.	ng, any changes thereto,	the information reque	ested in Part C, and any materia
Filing Fee; There is no federal filing fee.						
State: This notice shall be used to indicate reliance on the must file a separate notice with the Securities Adm amount shall accompany this form. This notice sha	inistrator in each state where sale	are to be, or have been made	. If a state requires the payor The Appendix to the notice	ient of a fee as a diecondi	tion to the claim for t	ne exemplion, a see in the prope
Failure to file notice in the the appropriate federal repredicated on the filing of	notice will not resi a federal notice.	ult in a loss of	an available sta	ate exemption	unless suc	ely, fallure to file th exemption is
Potential nersons who are to respond to the collec	tion of information contained in	this form are not required to	respond unless the form disp	lays a currently valid ON	lB control number.	

PROCESSED OCT 0 6 2006 P THOMSON FINANCIAL

Page 1 of 9

D-1452047_3.DOC

			A. BASIC IDENTII	FICATION DATA		
2.	Enter the information r	equested for the fo	ollowing:			
x	Each promoter of the is	ssuer, if the issuer	has been organized within the	past five years:		
X				e vote or disposition of, 10% o	r more of a class o	of equity securities of the
	issuer;					
Х				e general and managing partner	rs of partnership is	suers; and
<u>x</u>	Each general and mana				Пъ:	☑ General and/or
	eck Box(es) that Apply:		☐ Beneficial Owner	Executive Officer	☐ Director	Managing Partner
	l Name (Last name first, rkcentral Capital Mana		neral Partner			
			Street, City, State, Zip Code)			
	0 West Plano Parkway					
	eck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
	Name (Last name first,		to an of Canada Dantaga			
			tner of General Partner Street, City, State, Zip Code)			
	10 West Plano Parkway					
	eck Box(es) that Apply:		☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Fu	l Name (Last name first,	if individual)				
Bla	snik, Steven, L., Chief	Executive Officer	and President of General Pa	artner of General Partner		
			Street, City, State, Zip Code)			
	00 West Plano Parkway					
	eck Box(es) that Apply:		☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
	I Name (Last name first,			18.		
Ra	dunsky, David, Chief O	perating Officer	of General Partner of Gener	al l'artner		
	siness of Residence Addi 10 West Plano Parkway		Street, City, State, Zip Code)			
	eck Box(es) that Apply:		☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Fu	I Name (Last name first,	if individual)				s.//g : u/u/u/u
Bu	siness or Residence Addi	ress (Number and	Street, City, State, Zip Code)		<u></u>	
Ch	eck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Fu	l Name (Last name first,	if individual)				managing ratios
Bu	siness or Residence Add	ress (Number and	Street, City, State, Zip Code)			-
Ch	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Fu	Il Name (Last name first,	if individual)				managing i diulei
					····	
Bu	siness or Residence Addi	ress (Number and)	Street, City, State, Zip Code)			

	B. INFORMATION ABOUT OFFERING													
1. 1	las the is:	suer solo			er intend Iso in Ap							ng?	Yes	No ⊠
2.	What is th	e minim	um inve	stment t	hat will	be accep	oted from	n any in	dividual	?			\$ <u>300</u>	0,000.00
3. I	Does the c	offering	permit jo	oint own	ership o	f a singl	e unit:						Yes ⊠	No .
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)														
Full N	lame (Las	t name t	first, if ir	ıdividua	1)									
Busin	ess or Re	sidence .	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	ie)					
Name	of Assoc	iated Br	oker or I	Dealer	······································									
	in Which									****				
(Chec		ales" or ([AZ]	eneck inc [AR]	dividual [CA]	(CO)	[CT]	(DE)	[DC]	(FL)	[GA]	[HI]	[ID]	L	All States
(IL)		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]		
Full N	lame (Las	t name i	irst, if ir	ndividua	1)			<u></u>						**************************************
Busin	ess or Re	sidence A	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	ie)					
Name	of Assoc	iated Br	oker or I	Dealer										
	in Which												F-1	
(Cnec		nes" or o	neck inc [AR]	CA]	(CO)	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]	اــا	All States
(IL)	(IN)	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[. L] [MI]	[MN]	[MS]	[MO]		
[MT]		[NV]	[NH]	[rN]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	(OR)	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	lame (Las	t name f	irst, if in	dividua	1)				······································				······································	-
Busin	ess or Res	sidence /	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	ie)		·····			
Name	of Assoc	iated Br	oker or I	Dealer										
	in Which									***************************************				
(Chec	k "All Sta	iles" of (heck inc	lividual	States).		,	********					L	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	(FL)	[GA]	(HI)	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]		[NV]	[NH]	[N1]	[NM]	[NY]	[NC]	[ND]	[OH]	{OK}	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box o and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Debt

0 Equity 0 ☐ Common ☐ Preferred Convertible Securities (including warrants)..... Partnership Interests \$\,\ \dots \,\ 40,276,890.00 Other (Specify ______) \$_ 40,276,890.00 Answer also in Appendix, Column 3, if filing under ULOE

Amount Already

Sold

Aggregate Offering Price

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	10	\$ 40,276,890.00
Non-accredited Investors	0	\$0
Total (for filings under Rule 504 only)	N/A	\$ N/A
Answer also in Appendix, Column 4, if filing under ULOE		

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dollar Amount Sold
Rule 505	N/A	\$N/A
Regulation A	N/A	\$N/A
Rule 504	N/A	\$N/A
Total	N/A	\$ <u>N/A</u>

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees.....

Printing and Engraving Costs		\$	0
Legal Fees	×	\$	25,000
Accounting Fees		\$	0
Engineering Fees		\$ <u></u>	0
Sales Commissions (specify finder's fees separately)		\$	0
Other Expenses (identify)		\$	0
Total	×	\$ <u></u>	25,000

	b. Enter the difference between the aggregate and total expenses furnished in response to Perform to the issuer."	ort C-Question 4.a. This different	to Part C-Question 1 ce is the "adjusted gross	OF PR	OCEED	\$ <u>40,251,890.00</u>
5.	Indicate below the amount of the adjusted greeach of the purposes shown. If the amount for check the box to the left of the estimate. The proceeds to the issuer set forth in response to	r any purpose is not known, furnitotal of the payments listed must	ish an estimate and			
		·		Ó: Dire	ments to fficers, ectors, & filiates	Payments To Others
	Salaries and fees	••••••••••••••••••		\$		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installat	ion of machinery and equipment.		\$		\$
	Construction or leasing of plant building	gs and facilities		\$		\$
	Acquisition of other businesses (includ may be used in exchange for the assets			\$		\$
	Repayment of indebtedness			\$		\$
	Working capital			\$		\$
	Other (specify) (investments)			\$	×	\$ <u>40,251,890.00</u>
	Column Totals			\$	×	\$ 40,251,890.00
	Total Payments Listed (column totals a	dded)			\$ <u>40.</u>	251,890.00
		D. FEDERAL SIGNA	TURE			
sign	issuer has duly caused this notice to be signed lature constitutes an undertaking by the issuer to mation furnished by the issuer to any non-accr	furnish to the U.S. Securities and	d Exchange Commission,	filed un upon wr	der Rule 50 itten reques	05, the following st of its staff, the
Iss	uer (Print or Type)	Signature) Date			
Pe	rus Fund Plus, L.P.	XXXXXX 1/	September	er 12.	2006	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)				
Da		Chief Operating Officer of Parket Management, L.P.	entral Capital GP, LLC., g	eneral p	artner of P	arkcentral Capital
		ATTENTION				
	Intentional misstatements or omis		eral criminal violations	. (See	18 U.S.C.	. 1001).

		E. STATE SIGNATURE						
1.	rule?	eresently subject to any of the disqualification pro		Yes	No ⊠			
2.	The undersigned issuer hereby undertakes t (17 CFR 239.500) at such times as required	o furnish to any state administrator of any state in by state law.	which this notice is fil	ed, a notice on	Form D			
3.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.		ssucr is familiar with the conditions that must be which this notice is filed and understands that that these conditions have been satisfied.						
	e issuer has read this notification and knows t dersigned duly authorized person.	the contents to be true and has duly caused this no	otice to be signed on its	behalf by the				
Iss	uer (Print or Type)	Signature	Date					
Pet	rus Fund Plus, L.P.	Salas /	September <u>12</u> , 2006					
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)						
David Radunsky Chief Operating Officer of Parkcentral Capital GP, LLC., general partner of Parkcentral Management, L.P.								

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

ı	2 3 4							5
	non-ac investor (Pa	to sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	of investor and amou (Part C-lte	ite	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	
AL								
AK								
AZ								
AR			, , , , , , , , , , , , , , , , , , ,					
CA		No	Limited Partnership Interests \$1,549,851.00	1	\$1,549,851.00	0	\$0	No
СО								
СТ								
DE								
DC								
FL								
GA								
ні								
ID								
IL		No	Limited Partnership Interests \$930,836.00	1	\$930,836.00	0	\$0	No
IN								
1A							**************************************	
KS								
KY					· · · · · · · · · · · · · · · · · · ·			
LA								
ME								
MD								
MA							W. C.	
MI								

APPENDIX

1		2	3		4			5
	non-ac investor (Pa	to sell to credited s in State rt B- n 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Турс	Type of investor and amount purchased in State (Part C-Item 2)			
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Accredited Accredited			
MN								
MS								
мо								
MT								
NE								
NV								
NH								
NJ								
NM				· · · · · · · · · · · · · · · · · · ·				
NY				·				
NC								
ND								
ОН								
ОК								
OR	1							
PA			-					
RI								
SC	1							
SD								
TN								
TX		No	Limited Partnership Interests \$37,796,203.00	8	\$37,796,203.00	0	\$0	No
UT								
VT								
VA				*******				

APPENDIX

1	:	2	3.		4				
	non-acc investor (Par	to sell to credited s in State rt B- n 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Турс	Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount		
WA								•	
wv									
WI						•	_		
WY									
PR									